



# Mental Health Services Of Catawba County

Draft Local Business Plan

January 2, 2003

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## Section III. Qualified Provider Network Appendix A

Contact Person:

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## Local Business Plan: Strategic Plan Matrix

<b>Area Program(s)/County Program</b>	Mental Health Services of Catawba County
<b>Contact</b>	John M. Hardy, Area Director, (828)695-5900, fax(828)695-5949, johnh@mail.co.catawba.nc.us
<b>Submission Date</b>	01/03

**Item: III. Qualified Provider Network Development Appendix A 1**

**Goal: The local managing entity will meet the required elements to provide direct services.**

**Effective Date: 01/04**

Steps Taken	Steps Planned	Barriers
<p>The Quality Management Team--with input from the community, consumers, families, and the local CFAC--determined that divestiture of all services is not possible at this time.</p> <p>Currently 26.9% of services to our consumers are contracted to private providers. An additional 50+ clients are receiving services from independent enrolled practitioners.</p> <p>A Divestiture of Services policy has been written and approved by the Quality Management Team. (Attachment A)</p>	<p>Submit waivers with local business plan to be reviewed for initial certification.</p> <p>Prepare a narrative explaining the intentions of the LME regarding service provision during the next three years. The narrative will address the specific services and the basis of the need to provide those services as the divestiture plan unfolds.</p> <p>Develop RFA/RFP documents for each service to be divested and publish annually.</p>	<p>There is a limited provider network in this community and it will take a period of time to develop an adequate provider network.</p> <p>Lack needed information from state on specific best practices.</p> <p>Lack report card information related to treatment outcomes for members of provider network.</p>

<p>A draft Service Divestiture plan has been written and identifies all services and the anticipated time frame for divestiture. (Attachment B)</p> <p>Have prepared the list of contractual obligations that inhibit divestiture and a timeframe for eliminating these obstacles.</p>	<p>Continue to develop a plan that describes the firewall that will separate the LME and case management functions.</p> <p>Obtain completed document from the local CFAC that outlines the necessity to provide services until divestiture can occur.</p> <p>Gather data to facilitate development of a plan to eliminate services that do not meet best practice standards.</p>	
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<p><b>Reviewers Comments:</b></p>
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**Attachment A – Draft Divestiture of Services Policy**  
**Attachment B – Draft Service Divestiture Plan**

Mental Health Services of Catawba County

**Policies and Procedures**

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ACTIVITY: Management

Number:

SUBJECT: Divestiture of Services

Effective Date:

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POLICY:

It is the intent of Mental Health Services of Catawba County to divest itself of direct services in accordance with the State Plan. The task shall take place in a planned and strategic manner. Consumers and citizens of the community will be afforded the opportunity to participate in the design and planning process of an evolving service system. Every effort will be made to ensure a smooth transition of services, providing the least disruption possible in services to persons with disabilities.

The Local Managing Entity will be at all times seek to ensure that services are provided by professionals who are fully qualified, culturally responsive and follow best practice standards.

History Note: Approved by Mental Health Board on .

**DRAFT Service Divestiture Plan**

Service	First year (Jan.'04- Dec.'04)	Second year (Jan.'05-Dec.'05)	Third year (Jan.'06-Dec.'06)
Respite – contracting has already been accomplished, with CCC			
Detox/ Transportation for Adult SA clients to be provided via contract with local and/or regional providers <b>Target date: January '03</b>	Accomplished	Accomplished	Accomplished
ECIS – (Child DD clients)	Move to Public Health or DEC in accordance with Health Plan <b>Target date: January '04</b>		
Case Management (Adult and Child) including CAP/MR	Integrate case management under one level of supervisory oversight; cross-train in addition to specialized areas, retaining as a single unit under the LME <b>Target date: March '04</b>	Remain as part of LME	Remain as part of LME
Outpatient MH (Child) Outpatient SA (Child) Adolescent Sex Offender Program Psychiatric Services	Package all child outpatient services with juvenile court contract ---- RFP or move to another public agency <b>Target date for RFP: April '04</b>	<b>Provider becomes operational: January '05</b>	
Smart Start	Explore all options for divestiture – possibly RFP singly, with other children's services, or move to another public agency <b>Target date for RFP: April'04</b>	<b>Provider becomes operational: January '05</b>	
Adult MH Outpatient Adult SA Outpatient Psychiatric services SAIP – Adult Adult EAP treatment	Package Outpatient MH/SA, court programs (ADETS, DWI), SAIP, psychiatric services and EAP treatment --- <b>Target date for RFI: July '04</b>	RFP, spin-off as a private nonprofit or spin-out under another vendor <b>Target date: January '05</b> <b>Provider becomes operational: July '05</b>	

**DRAFT Service Divestiture Plan**

Service	First year (Jan.'04-Dec.'04)	Second year (Jan.'05-Dec.'05)	Third year (Jan.'06-Dec.'06)
DD Residential and LifeSkills (Adult DD)	Seek waiver to continue operations as they currently are	Package DD Residential and Lifeskills, possibly along with some existing DD contractors--- Complete new building behind MH Main, and move into facility by July '04 <b>Target date for RFI: January '05</b> RFP, spin-off as private nonprofit or spin-out under another vendor <b>Target date for RFP: July '05</b>	<b>Provider becomes operational: January '06</b>
MH Residential Connections CSP (Community Support Program) ACTT (ACT TEAM) Psychiatric Services	Seek waiver to continue operations as they currently are	Package Connections, MH Residential, CSP, ACTT, and psychiatric services-- <b>Target date for RFI: January '05</b> RFP, spin-off as private nonprofit or spin-out under another vendor <b>Target date for RFP: July '05</b>	<b>Provider becomes operational: January '06</b>
ACT Program	Seek waiver to continue operations as they currently are	Explore options with school system taking over <b>Target date for RFI: March '05</b>	<b>Target date for RFP: January '06</b> <b>Provider becomes operational: July '06</b>
LME ROLE	Core functions & limited service provision. Core functions consist of: Screening, assessment, referral, emergency triage and services, care coordination, service coordination, consultation, education and prevention		Core functions, with case management as only service

**RFI – Request for information;** informal solicitation from the community with the question “what might you be able to do with \_\_\_\_\_ services for \_\_\_\_\_ people?”

**RFP – Request for proposal;** formal set of expectations set forth by the Area Program outlining details of what needs to be done. This becomes a statement of “We need you to do \_\_\_\_\_ for \_\_\_\_\_ people with the expectation of .....”; this is a step closer to contract specifics

**“Packaging”** (as used in this grid) – combining services in a common space, with the collective effort to be financially self-sufficient (i.e., not requiring county funds or fund balance to keep financially viable)

Major Lease Expirations: First Plaza 3/31/05  
CVCC 2/16/03

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<b>Submission Date</b>	01/02/03

**Item: III. Qualified Provider Network Development Appendix A 2**

**Goal: The local managing entity will submit all requirements necessary if approved for service provision.**

**Effective Date: 01/04**

Steps Taken	Steps Planned	Barriers
<p>Minutes are on file that relate to more than 2 years of public/private relationships and contracting.</p> <p>Notes are on file of meetings between independent enrolled providers in this area.</p> <p>Correspondence is on file of communication between providers and the Area Program related to contracting of services.</p> <p>We have estimated the percentage of consumers who may potentially fall outside of the target populations based upon current client base. We have begun the process of identifying specific consumers and developing a transition plan for this</p>	<p>Prepare a written description and history for each area for which the LME plans to provide services.</p> <p>Continue to engage in discussions with community providers regarding the service needs of all of the target populations and especially those who have complex needs, and also those in the non-target population.</p> <p>Develop RFP that addresses specialized treatment needs incorporating the local CFAC concerns.</p>	

<p>population.</p> <p>After January 1, 2003, consumers seeking services who fall outside of the target populations will be referred to their choice of appropriate community services/supports.</p> <p>Have identified the consumers who fall into the category of having complex needs not easily met by individual or small group qualified providers and addressed these concerns in forums with potential providers.</p> <p>Have had dialog with members of the local CFAC regarding their concerns and priorities related to divestiture of services.</p>		
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<p><b>Reviewers Comments:</b></p>
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<b>Submission Date</b>	01/02/03

**Item: III. Qualified Provider Network Development Appendix A 3**

**Goal: The local managing entity complies with requirements related to informed consumer choice of qualified providers.**

**Effective Date: 01/04**

Steps Taken	Steps Planned	Barriers
<p>Developed Consumer Choice policy that has been approved by the Quality Management Team that ensures that all consumers are fully informed of the provider choices. (Attachment C)</p> <p>Developed a form for consumer signature when they elect to receive services from the LME. The statement attests to the fact that the consumer has been fully informed of their provider choices and that he/she has made an informed choice to obtain services from the LME through no effort of the LME to guide this decision.</p>		

**Reviewers Comments:**

**Attachment C - Draft Consumer Choice Policy**

## DRAFT

### Local Management Entity of Catawba County

#### Policies and Procedures

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ACTIVITY:	Administration	Number
		Effective Date
SUBJECT:	Consumer Choice	Board Approved
		QMT Approved

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#### POLICY

It is the policy of Mental Health Services of Catawba County to assure that all consumers are informed of community resources and given a choice of providers, services, and supports within a 30 mile/30 minute radius of Catawba County. At no time will agency staff attempt to direct persons toward services provided by Mental health Services of Catawba County.

#### Procedure

1. The screening clinician will provide each consumer a directory of providers and community supports with a description of the services/resources each provides.
2. The consumer and/or family will select the provider from whom they wish to receive services
3. In the event the consumer chooses mental health Services of Catawba County as the service provider, the screening clinician will obtain the consumer's signature on the Statement of Consumer Choice.

Client Name _____ Record No: _____	
<b>MENTAL HEALTH SERVICES OF CATAWBA COUNTY</b> <b>Statement of Consumer Choice</b>	
<p>I understand that I have the right to select my Service Provider. I have received information on the Service Providers and community supports available to me in the area where I live. I also understand that I may change Service Providers at any time, but if possible, a reasonable notice will be given to the Care Coordinator and Service Provider.</p>	
<b>I HAVE SELECTED THE FOLLING PROVIDER (S):</b>	
1. _____	
2. _____	
3. _____	
<b>I HAVE SELECTED MENTAL HEALTH SERVICES OF CATAWBA COUNTY AS THE SERVICE PROVIDER FOR THE FOLLOWING REASONS:</b>	
1. _____	
2. _____	
3. _____	
Client/Guardian Signature: _____	Date: _____
Witness: _____	Date: _____

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<b>Submission Date</b>	01/02/03

**Item: III. Qualified Provider Network Development Appendix A 4**

**Goal: The local managing entity will arrange for independent care management when involved in the role of direct service qualified provider.**

**Effective Date: 01/04**

<b>Steps Taken</b>	<b>Steps Planned</b>	<b>Barriers</b>
<p>Have determined that it is the role of the LME to keep care management services separate from direct care services including those services provided by the LME.</p> <p>To date no steps have been taken in this area</p>	<p>When initially certified as a LME, care management will be contracted out for any services not divested.</p> <p>Identify providers in the area that provide care management.</p>	<p>Need clarification of care management as opposed to case management in regard to this element.</p>

**Reviewers Comments:**